

07/09/01
31060 U.S. PTO

07-10-01
A
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Mai H. Nguyen
Docket: 30448.73USU1
Title: METHOD OF DIAGNOSING BREAST CANCER USING NIPPLE FLUID

31060 U.S. PTO
09/901339
07/09/01

CERTIFICATE UNDER 37 CFR 1.10

'Express Mail' mailing label number: ET528312568US

Date of Deposit: July 9, 2001

I hereby certify that this paper or fee is being deposited with the United States Postal Service 'Express Mail Post Office To Addressee' service under 37 CFR 1.10 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

By: 

Name: Richelle Ann Domingo

BOX PATENT APPLICATION
Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

We are transmitting herewith the attached:

- 070901 31060 U.S. PTO
- ☒ Transmittal sheet, in duplicate, containing Certificate under 37 CFR 1.10.
 - ☒ Utility Patent Application Transmittal, in duplicate
 - ☒ Fee Transmittal for FY 2001
 - ☒ Application Data Sheet
 - ☒ Utility Patent Application: Spec. 12 pgs; 11 claims; Abstract 1 pg.
The fee has been calculated as shown below in the "Claims as Filed" table.
 - ☒ Authorization for the US PTO to charge the amount of \$355.00 to Deposit Account No. 50-0306 to cover the Filing Fee
 - ☒ Return postcard

CLAIMS AS FILED

| Number of Claims Filed | | In Excess of: | | Number Extra | | Rate | | Fee |
|------------------------------|---|---------------|---|--------------|---|-------|---|----------|
| Basic Filing Fee | | | | | | | | \$355.00 |
| Total Claims | | | | | | | | |
| 11 | - | 20 | = | 0 | x | 9.00 | = | \$0.00 |
| Independent Claims | | | | | | | | |
| 3 | - | 3 | = | 0 | x | 40.00 | = | \$0.00 |
| MULTIPLE DEPENDENT CLAIM FEE | | | | | | | | \$0.00 |
| TOTAL FILING FEE | | | | | | | | \$355.00 |

Please charge any additional fees or credit overpayment to Deposit Account No. 50-0306. A duplicate of this sheet is enclosed.

MANDEL & ADRIANO

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(626)395-7801

By: 

Name: SaraLynn Mandel
Reg. No.: 31,853
Initials: SLM
Customer No. 26,941

Please type a plus sign (+) inside this box → ☐

PTO/SB/05 (11-00)
Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 30448.73USU1
First Inventor Mai H. Nguyen
Title Method of Diagnosing Breast Cancer Using Nipple Fluid
Express Mail Label No. ET528312568US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 15]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☐ Drawing(s) (35 U.S.C. 113) [Total Sheets]
5. Oath or Declaration [Total Pages]
 - a. ☐ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 CFR 1.63 (d))
(for continuation/divisional with Box 18 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☒ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission
(if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement of Power of Attorney
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 [Copies of IDS Citations]
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122
(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☒ Other: Transmittal Sheet, in duplicate

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No. _____

Prior application information:

Examiner _____

Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

☒ Customer Number or Bar Code Label

26,941

or ☐

Correspondence address below

| | | | |
|---------|-----------|----------|--|
| Name | | | |
| | | | |
| Address | | | |
| | | | |
| City | State | Zip Code | |
| Country | Telephone | Fax | |

| | | | |
|-------------------|------------------------|-----------------------------------|--------|
| Name (Print/Type) | SaraLynn Mandel | Registration No. (Attorney/Agent) | 31,853 |
| Signature | <i>SaraLynn Mandel</i> | Date | 7/9/01 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

PTO
09/901339
07/09/01

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 355.00

Complete if Known

Application Number
Filing Date July 9, 2001
First Named Inventor Mai H. Nguyen
Examiner Name
Group Art Unit
Attorney Docket No. 30448.73USU1

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:
- Deposit Account Number 50-0306
Deposit Account Name Mandel & Adriano
- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
☒ Applicant claims small entity status. See 37 CFR 1.27
2. ☐ Payment Enclosed:
☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|----------------------------|----------------------------|------------------------|----------|
| 101 710 | 201 355 | Utility filing fee | 355 |
| 106 320 | 206 160 | Design filing fee | |
| 107 490 | 207 245 | Plant filing fee | |
| 108 710 | 208 355 | Reissue filing fee | |
| 114 150 | 214 75 | Provisional filing fee | |

SUBTOTAL (1) (\$) 355.00

2. EXTRA CLAIM FEES

Total Claims 11 -20** = 0 x 9 = 0
Independent Claims 3 -3** = 0 x 40 = 0
Multiple Dependent =

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description |
|----------------------------|----------------------------|--|
| 103 18 | 203 9 | Claims in excess of 20 |
| 102 80 | 202 40 | Independent claims in excess of 3 |
| 104 270 | 204 135 | Multiple dependent claim, if not paid |
| 109 80 | 209 40 | ** Reissue independent claims over original patent |
| 110 18 | 210 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$) 0.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

| Large Entity Fee Code (\$) | Small Entity Fee Code (\$) | Fee Description | Fee Paid |
|----------------------------|----------------------------|--|----------|
| 105 130 | 205 65 | Surcharge - late filing fee or oath | |
| 127 50 | 227 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 130 | 139 130 | Non-English specification | |
| 147 2,520 | 147 2,520 | For filing a request for ex parte reexamination | |
| 112 920* | 112 920* | Requesting publication of SIR prior to Examiner action | |
| 113 1,840* | 113 1,840* | Requesting publication of SIR after Examiner action | |
| 115 110 | 215 55 | Extension for reply within first month | |
| 116 390 | 216 195 | Extension for reply within second month | |
| 117 890 | 217 445 | Extension for reply within third month | |
| 118 1,390 | 218 695 | Extension for reply within fourth month | |
| 128 1,890 | 228 945 | Extension for reply within fifth month | |
| 119 310 | 219 155 | Notice of Appeal | |
| 120 310 | 220 155 | Filing a brief in support of an appeal | |
| 121 270 | 221 135 | Request for oral hearing | |
| 138 1,510 | 138 1,510 | Petition to institute a public use proceeding | |
| 140 110 | 240 55 | Petition to revive - unavoidable | |
| 141 1,240 | 241 620 | Petition to revive - unintentional | |
| 142 1,240 | 242 620 | Utility issue fee (or reissue) | |
| 143 440 | 243 220 | Design issue fee | |
| 144 600 | 244 300 | Plant issue fee | |
| 122 130 | 122 130 | Petitions to the Commissioner | |
| 123 50 | 123 50 | Processing fee under 37 CFR 1.17(q) | |
| 126 180 | 126 180 | Submission of Information Disclosure Stmt | |
| 581 40 | 581 40 | Recording each patent assignment per property (times number of properties) | |
| 146 710 | 246 355 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 710 | 249 355 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 710 | 279 355 | Request for Continued Examination (RCE) | |
| 169 900 | 169 900 | Request for expedited examination of a design application | |

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

Name (Print/Type) SaraLynn Mandel

Registration No. 31,853
(Attorney/Agent)

Complete (if applicable)

Telephone 626/395 7801

Signature

SaraLynn Mandel

Date 7/9/01

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